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NOTICE OF APPEAL FROM THE EXAMINER TO THE **BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional) 018422-000210ÙS



★Total of one forms are submitted.

	In re Application of			ì
	BOLES et al.			
	Application Number 09/336,609		Filed	=
			June 18, 1999	چ
	For DETECTION OF NON-VIRAL ORGANISMS WITH SRP RNA			5
				<u>.</u>
	Group Art Unit	Examiner		
	1655	J. Einsmann		

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

	The fee for this Notice of Appeal is (37 CFR 1.17(b))	\$310.			
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the is reduced by half, and the resulting fee is:	e fee shown above			
	A check in the amount of the fee is enclosed.				
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	The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.				
	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.				
	☑ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.				
-	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
	I am the .	frmelle Julent			
	applicant/inventor.	Signature			
:	assignee of record of the entire interest. See 37 CFR 3.71.				
	Statement under 37 CFR 3.73(b) is enclosed.				
	☑ attorney or agent of record.	Annette S. Parent, Reg. No. 42,058			
	attorney or agent acting under 37 CFR 1.34(a).	Typed or printed name			
	Registration number if acting under 37 CFR 1.34(a)				
08/01/2001	NGUYEN 00000063 201430 09336609	July 25, 2001			
01 FC:219	155.00 CH	Date			
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their forms if more than one signature is required, see below*.	representative(s) are required. Submit multiple			

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